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|                      | Class | Subclass |
| ISSUE CLASSIFICATION |       |          |

**O.I.P.E.**

PATENT DATE

SCANNED

## Q.A.

|                              |                   |                  |                |                          |                   |
|------------------------------|-------------------|------------------|----------------|--------------------------|-------------------|
| APPLICATION NO.<br>09/787784 | CONT/PRIOR<br>D F | CLASS<br>380 705 | SUBCLASS<br>71 | ART UNIT<br>2131<br>3621 | EXAMINER<br>Sherr |
|------------------------------|-------------------|------------------|----------------|--------------------------|-------------------|

## APPLICANTS

## Rodney Perkins

**TITLE**

**ORIGINAL**

**CROSS REFERENCE(S)**

[illegible]

|   |  |             |            |   |                      |
|---|--|-------------|------------|---|----------------------|
| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>   | <b>DRAWINGS</b>                              |             |            | <b>CLAIMS ALLOWED</b>                     |                      |
|   | Sheets Drwg.                                 | Figs. Drwg. | Print Fig. | Total Claims                              | Print Claim for O.G. |
| <input checked="" type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.                             | _____<br>(Assistant Examiner) (Date)         |             |            | <b>NOTICE OF ALLOWANCE MAILED</b><br><br> |                      |
| <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent No. _____<br>_____<br>_____ | _____<br>(Primary Examiner) (Date)           |             |            | <b>ISSUE FEE</b><br>Amount Due Date Paid  |                      |
| <input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.   | _____<br>(Legal Instruments Examiner) (Date) |             |            | <b>ISSUE BATCH NUMBER</b>                 |                      |

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